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Office Use Only



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ALL AHASSEE, FLORIDA

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COVER LETTER

| TO: | Registration Section Division of Corporations | | | |
|---------------|--|--|--|---|
| SUBJ | ест:С | | EXCAVATING, ion - must include suffix | INC. |
| Dear S | ir or Madam: | | | |
| "Certif | icate of Existence | | for Authorization to Transactanding" and check are sub iness in Florida. | |
| Please | return all correspo | ondence concerning this ma | tter to the following: | |
| Chr | ristine GRI | EENAWalt | | |
| | | Name | of Person | |
| Gre | <u>eenawalt</u> | Excavating, Inc | ompany | |
| 45 | Miller R | | ldress | |
| | ansfer | City/Stat | e and Zip code | |
| <u>ge</u> | 2i 4450_ c | hris Qyahoo. | COM ed for future annual report r | notification) |
| | | concerning this matter, please | | |
| Chri | Stine Gree Name of Person | nawalt at (72) Area C | Oode Daytime Teleph | hone Number |
| | STREET/COUR Registration Sec Division of Corp Clifton Building 2661 Executive Tallahassee, FL | orations Center Circle | MAILING A Registration S Division of Co P.O. Box 6327 Tallahassee, F | ection orporations 7 |
| Enclos | ed is a check for t | he following amount: | | |
| ⋈ \$70 | 0.00 Filing Fee | ☐ \$78.75 Filing Fee & Certificate of Status | □ \$78.75 Filing Fee & Certified Copy | S87.50 Filing Fee, Certificate of Status & Certified Copy |

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA. GREENAWALT EXCAVATING INC.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.") GEI Drilling Inc.
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) 2. Pennsylvania 3. 25-1890125
(State or country under the law of which it is incorporated) (FEI number, if applicable) 4. (Date of duration, if other than perpetual) fincorporation) (Date of duration, if of 6 - 9 - 16 (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 7. 45 Miller Rd (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Theresa Dunn Name: 301 Gatewood Ct

Ormond Beach, Florida 32174

(City) (Zip code) Office Address: Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent. Theresa Dunn (Registered agent's signature)

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

| 11. Names and business addresses of officers and/or directors: | | | | |
|---|--|--|--|--|
| A. DIRECTORS | | | | |
| Chairman: Christine Greenawalt | | | | |
| Address: 45 Miller Rd Transfer PA 16154 | | | | |
| | | | | |
| Vice Chairman: Randall Greenawalt | | | | |
| Address: 45 Miller Rd Transfer PA 16154 | | | | |
| | | | | |
| Director: | | | | |
| Address: | | | | |
| | | | | |
| Director: | | | | |
| Address: P TO | | | | |
| B OFFICERS | | | | |
| B. OFFICERS | | | | |
| President: Christine Greenawalt | | | | |
| Address: 45 Miller Rd Transfer PA 16154 | | | | |
| | | | | |
| Vice President: Randall Greenawalt | | | | |
| Address: 45 Miller Rd Transfer PA 16154 | | | | |
| | | | | |
| Secretary: Randall Greenawalt | | | | |
| Address: 45 Miller Rd Transfer PA 16154 | | | | |
| Treasurer: Christine Greenawalt | | | | |
| Address: 45 Miller Rd Transfer PA 16154 | | | | |
| NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. | | | | |
| 12. Christine Greenawalt | | | | |
| Signature of Director or Officer The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein | | | | |
| are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. | | | | |
| 13. Christine Greenawalt President | | | | |

(Typed or printed name and capacity of person signing application)

COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF STATE

06/07/2016

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

GREENAWALT EXCAVATING, INC.

is duly registered as a Pennsylvania Business Corporation under the laws of the Commonwealth of Pennsylvania and remains subsisting so far as the records of this office show, as of the date herein.

I DO FURTHER CERTIFY THAT this Subsistence Certificate shall not imply that all fees, taxes and penalties owed to the Commonwealth of Pennsylvania are paid.

IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written

Secretary of the Commonwealth

Certification Number: TSC160607100598-1

Verify this certificate online at http://www.corporations.pa.gov/orders/verify.aspx